● PRINTER RUSH ●
(PTO ASSISTANCE)

IFW

Application : 10/720321	**Examiner :** Mohandesi, I	**GAU :** 2834
From: AC	**Location:** (IDC) FMF FDC	**Date:** 2·8·05

Tracking #: 06037551   **Week Date:** 11·08·04

DOC CODE	DOC DATE	MISCELLANEOUS
☐ 1449	_____	☐ Continuing Data
☐ IDS	_____	☐ Foreign Priority
☑ CLM	11·25·03	☐ Document Legibility
☐ IIFW	_____	☐ Fees
☐ SRFW	_____	☐ Other
☐ DRW	_____	
☐ OATH	_____	
☐ 312	_____	
☐ SPEC	_____	

[RUSH] MESSAGE: _Improper Dependency:_

A) Original claim 7 (renumbered Claim 5) depends on original claim 4, which is cancelled

B) Original claim 8 (renumbered Claim 6) depends on original claim 5, which is cancelled.

Please Resolve.

Claim 21 (original 23) ends without period   Thank You, AC

[XRUSH] RESPONSE: _____

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INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04